BRIC 21:

Global transcriptome profiling to identify cellular stress mechanisms responsible for spaceflight-induced antibiotic resistance

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OVERVIEW

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- Investigation
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- Importance and Reason for ISS
- Expected results
- How Results will advance the field
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CENTRAL HYPOTHESIS:

 Exposure to the human spaceflight environment causes stresses (i.e. "spaceflight syndrome") which can lead to increased antibiotic resistance in bacterial opportunistic pathogens.

INVESTIGATION

- Two harmless surrogates of opportunistic pathogens (Bacillus subtilis and Staphylococcus epidermidis) will be cultured in microgravity on ISS for 24 +/- 4 hours, frozen, and returned to Earth.
- Global stress responses will be measured in comparison to ground controls using Whole Transcriptome Shotgun Sequencing (a.k.a. "RNA-Seq").
- The spectrum of antibiotic resistance from flight samples and ground controls will be compared using the Omnilog phenotype microarray system containing a large collection of antibiotics.
- The rate of spontaneous mutation to resistance to the antibiotic Rifampicin (RFM) will be measured and compared to ground controls.

GOALS AND OBJECTIVES

- Characterize changes in the transcriptomes of bacteria exposed to human spaceflight stresses, esp. microgravity, focusing on global stress responses.
- Compare the extent and levels of resistance to various antibiotics resulting from spaceflight compared to ground controls.
- Compare the mutation rates of bacteria grown in space vs. ground controls.

MEASUREMENT APPROACH

- Total RNA will be isolated from flight and ground-control cultures and their global transcriptomes compared using RNA-Seq. Genes significantly up- or down-regulated will be identified and further investigated for their stress relevance.
- Upon return, cultures will be inoculated immediately into 96-well Omnilog antibiotic plates (PM-11C, 12B, 13B) and assayed for the level of resistance to a battery of antibiotics, relative to ground control cultures.
- Cells returned from ISS will be plated for (i) total viable cells and (ii) RFM-resistant mutants. Mutation frequencies will be computed and compared relative to ground controls. Mutations will be identified by nucleotide sequencing.

IMPORTANCE AND REASON FOR ISS

- Prior evidence that astronaut immune function deteriorates during prolonged spaceflight.
- Prior evidence suggesting virulence and antibiotic resistance of some (but not all) bacteria increases during spaceflight.
- Thus, development of multiple antibiotic resistance in opportunistic pathogens is of importance to astronaut health.
- Prior evidence that the bacterial "spaceflight syndrome" appears to be organism-specific, and no fundamental underlying mechanism has yet emerged.

EXPECTED RESULTS

- If the Central Hypothesis is supported:
 - Transcription of global stress response genes will be up-regulated significantly in ISS-grown samples compared to ground control samples.
 - ISS-grown cells will exhibit resistance to a greater number of antibiotics, and/or to higher concentrations, than ground-control cells.
 - Mutation frequencies to RFM resistance will be significantly higher in the ISS-grown cultures than the ground control cultures.

HOW RESULTS WILL ADVANCE THE FIELD

- Little is currently known at the molecular level about the global cellular stress responses of microbes in the human space flight environment and how they impact pathogenicity and antibiotic resistance.
- This project will enhance our knowledge of how potentially harmful microbes respond and adapt to the spaceflight environment.
- Knowledge gained from the project will ultimately benefit astronaut health during longterm missions.

EARTH BENEFITS / SPIN-OFF APPLICATIONS

- Development and dispersal of multiply-resistant pathogenic bacteria is a chronic problem in clinical settings.
- Clinical settings in some ways mirror the human spaceflight environment; several people with compromised immune systems are housed in confined quarters for extended periods of time.
- Understanding how antibiotic resistance develops in space could lead to better methods for combating hospital-acquired infections.